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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)		Application Number	10/687,174
		Filing Date	October 15, 2003
		First Named Inventor	Jianfu J. WANG
		Art Unit	1641
		Examiner Name	J. Cheu
Total Number of Pages in This Submission	24	Attorney Docket Number	559312000100

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (original + copy for fee processing (2 pages))  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply (inclusive of exhibit dividers and exhibits (20 pages))  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request (1 page)  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): • Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No.: 25226)		
Signature	<i>Jill A. Jacobson</i>		
Printed name	Jill A. Jacobson		
Date	October 20, 2005	Reg. No.	40,030

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV544975614US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: October 20, 2005	Signature: <i>Rosemarie Puljic-Salmeron</i> (Rosemarie Puljic-Salmeron)



<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
		Application Number	10/687,174
		Filing Date	October 15, 2003
		First Named Inventor	Jianfu J. WANG
		Examiner Name	J. Cheu
		Art Unit	1641
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	559312000100
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b>	<b>225.00</b>

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00
<b>2. EXCESS CLAIM FEES</b>							
							<b>Small Entity</b>
<b>Fee Description</b>							<b>Fee (\$)</b>
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
							<b>Fee (\$)</b>
							<b>Fee Paid (\$)</b>
<b>Total Claims</b> 44 - 44 = 0 x 25.00 = 0.00							
<b>Indep. Claims</b> 9 - 9 = 0 x 100.00 = 0.00							
							<b>Multiple Dependent Claims</b>
							<b>Fee (\$)</b>
							<b>Fee Paid (\$)</b>
							180.00
							0.00
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>		<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
- 100 =		/50	(round up to a whole number) x		125.00	= 0.00	
<b>4. OTHER FEE(S)</b>							
							<b>Fees Paid (\$)</b>
Non-English Specification, \$130 fee (no small entity discount)							0.00
Other (e.g., late filing surcharge): 2252 Extension for response within second month							225.00

<b>SUBMITTED BY</b>			
Signature	<i>Jill A. Jacobson</i>	Registration No. (Attorney/Agent)	40,030
Name (Print/Type)	Jill A. Jacobson	Telephone	(650) 813-5876
		Date	October 20, 2005